

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Communications Workers of America Working Voices</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488486	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Tell That Story</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2016</b>		
Mailing Address 2120 Huntington Drive, Suite B			Amount <b>6709.50</b>		
City South Pasadena	State CA	Zip Code 91030	Transaction ID : D33128		
Purpose of Expenditure Direct Voter Contact - Text Msg.		Category/ Type 005	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 11 / 2016</b>		
Name of Federal Candidate Ross, Deborah, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<b>23925.62</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Tell That Story</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2016</b>		
Mailing Address 2120 Huntington Drive, Suite B			Amount <b>1401.00</b>		
City South Pasadena	State CA	Zip Code 91030	Transaction ID : D33131		
Purpose of Expenditure Direct Voter Contact - Text Msg.		Category/ Type 005	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 11 / 2016</b>		
Name of Federal Candidate Carroll, Morgan, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought		<b>4996.06</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>8110.50</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Steffens, Sara, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 21 / 2016**

Signature